

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095464

Entity Name: A1A SERVICES, INC.

FILED  
Apr 15, 2005  
Secretary of State

## Current Principal Place of Business:

1047 NW 81ST TERRACE  
PLANTATION, FL 33322

## New Principal Place of Business:

2691 SOUTH COURSE DRIVE  
110  
POMPANO BEACH, FL 33069

## Current Mailing Address:

1047 NW 81ST TERRACE  
PLANTATION, FL 33322

## New Mailing Address:

2691 SOUTH COURSE DRIVE  
110  
POMPANO BEACH, FL 33069

FEI Number: 05-0529299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ASIF, SAMIRA S  
Address: 1047 NW 81ST TERRACE  
City-St-Zip: PLANTATION, FL 33322

Title: VSD ( ) Delete  
Name: ASIF, MOHAMMAD  
Address: 1047 NW 81ST TERRACE  
City-St-Zip: PLANTATION, FL 33322

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ASIF, SAMIRA S  
Address: 2691 SOUTH COURSE DR, 110  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VSD (X) Change ( ) Addition  
Name: ASIF, MOHAMMAD  
Address: 2691 SOUTH COURSE DR, 110  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOHAMMAD ASIF

VP

04/15/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date